

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, state bar number, and address):</i>   TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR <i>(Name):</i> _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
IN THE MATTER OF THE ADOPTION PETITION OF:  <i>(Names of adopting parents or parent)</i>	
<b>PETITIONER CONSENT AND AGREEMENT TO ADOPTION</b> <b>(Petitioners and Child 12 or Older)</b>	ADOPTION CASE NUMBER:

1. a. I, the undersigned petitioner, hereby agree with the State of California and with the child named in the adoption petition that the child shall be adopted and treated in all respects as my lawful child and shall enjoy all the rights of a natural child of mine, including the right of inheritance.

b. ☐ I, the undersigned petitioner, also consent to the adoption by the other petitioner. *(Do not check this box if you are the only petitioner.)*



\_\_\_\_\_  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(SIGNATURE OF PETITIONER)

2. a. I, the undersigned petitioner, hereby agree with the State of California and with the child named in the adoption petition that the child shall be adopted and treated in all respects as my lawful child and shall enjoy all the rights of a natural child of mine, including the right of inheritance.

b. ☐ I, the undersigned petitioner, also consent to the adoption by the other petitioner.



\_\_\_\_\_  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(SIGNATURE OF PETITIONER)

3. a. ☐ I, the child, am 12 years of age or older, and I consent to the adoption by each petitioner.

b. ☐ I request that my name before this adoption be included on the order of adoption.

c. ☐ I request that I be able to contact my sister(s) or brother(s) after my adoption is finalized.



\_\_\_\_\_  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(SIGNATURE OF CHILD)

Executed on *(date)*:

In the presence of

\_\_\_\_\_  
JUDICIAL OFFICER